Division of Long Term Supports and Services Bureau of Developmental Services

Rate Structure Work Group May 17, 2022





2

Goals for 5/17 Meeting

- 1. General cost report revisions
- 2. Review schedules and services discussed on 5/6
- 3. Begin discussing Staffed Residential Services
- 4. Logistics for cost report feedback and revisions

This Rate Setting Work Group is open to the public. Members of the public who are not on the Rate Setting Work Group can listen to the group's discussions but will not be able to ask questions or participate in discussions occurring between Work Group members.

This structure ensures that the Department can engage a diverse group of stakeholders in substantive dialogue while also providing transparency and general updates to the general public.

If you are a member of the public and have questions about the Rate Setting Work Group and/or its work, please contact us at BDSRateStructureWorkgroup@dhhs.nh.gov and we will respond as soon as possible.



General Cost Report Updates



General Cost Report Updates

- Telehealth terminology revisions to all schedules. You will now see "Telehealth/Remote"
- Changing terminology from "onsite supervision" to "face-to-face supervision."
- Addition of Notes section on each tab for Work Group members to use for documenting feedback.
- Added average hours worked in a week and sub-categories.
- Added general instructions to worksheets and line specific instructions



Cost Report Review



Review of Productivity

Direct Service Productivity in Work Week	
This section requests information regarding the 'typical' week for a person providing hands-on care for a	
particular service. Use informed judgement to consider variations and determine an average week. If	
time varies greatly week-to-week, consider activity time over the course of a year and divide total by 52.	
Total Hours	
Average hours worked in a week	
Direct Service	
Providing hands-on direct services	
Transportation Activities	
Transporting individuals between residence and activities/services	
Transporting individuals for medical appointments	
Travel time between individuals receiving service	
Coordinating transportation for the individual in support of employment	
Office Activites	
Recordkeeping, documentation, and office time (do not include documentation during the course of	
service provision)	
'Employer time' (e.g. receiving one-on-one supervision, staff meetings, etc.)	
Cancelled time with individuals (include only 'lost' time, not necessarily the length of the planned service)	



Review of Productivity (continued)

Service Plan Activities	
Admissions and admission screenings	
Communication during transition of care	
Activities related to Medicaid eligibility (establishing, maintaining, redetermination, etc.)	
Activities related to the transition of participants from institutional settings	
Completing risk assessments, participating in ISP meetings, and developing ISPs	
Completing or participating in assessments for which the member is not present	
Participating in individual planning meetings	
Developing cost comparison budgets, authorizations, budget modifications, and similar documents	
Completing and processing 90-day monitoring checklists	
Other monitoring of participants' health, safety, satisfaction, outcomes, and service utilization	
Completing annual level of care determinations	
Other Activities	
Incident management	
Community integration services	
Completing and following-up on incident reports	
Program development	
Program preparation/set-up/clean-up	
Other - Please Describe	
Other - Please Describe	
Other - Please Describe	
Total Time	0.00



Review of Productivity (continued)

Transportation Expenses included in Direct Service	
Complete this section if transportation expenses included on Schedule E - Expenses, Lines 18 - 20	
include expenses directly related to the service being provided.	
Percent of the total expense related to transportation expenses for the applicable service.	
Does your agency own or lease specialized vehicles?	
Number of miles driven for medical transportation of individuals not covered under other programs	
Number of miles driven for non-medical transportation of individuals receiving service	
Number of miles driven when individual is not in the vehicle	



Review of Day Habilitation

Information Requested	Example	Day Habilitation / Community Participation	PDMS
Caseload and Service Design - Current Services			
Number of individuals receiving services from your organization	50		
Number of days per year services are provided	250		
Average number of days per year a typical individual participates in the service	235.0		
Average number of hours per day services are provided	6.0		
Average number of hours per day a typical individual receives services	4.75		
Percentage of individuals receiving less than four hours of service per day	40%		
Percentage of individuals receiving four or more hours of service per day	60%		
Number of individuals receiving medication management during provision of service	1		
Caseload and Service Design - PreCOVID 19 Pandemic			
Number of individuals receiving services from your organization	50		
Number of days per year services are provided	250		
Average number of days per year a typical individual participates in the service	235.0		
Average number of hours per day services are provided	8.0		
Average number of hours per day a typical individual receives services	6.50		
Percentage of individuals receiving less than four hours of service per day	40%		
Percentage of individuals receiving four or more hours of service per day	60%		
Number of individuals receiving medication management during provision of service	1		
Length of Services (total should equal 100%)			
Percentage of individuals needing services 2 or fewer hours per day	40.00%		
Percentage of individuals needing services between 2 and 4 hours per day	20.00%		
Percentage of individuals needing services between 4 and 6 hours per day	20.00%		
Percentage of individuals needing services more than 6 hours per day	20.00%		



Review of Day Habilitation (continued)

Information Requested	Example	Day Habilitation / Community Participation	PDMS
Supervision of Direct Care Staff Does your organization provide on-site supervision of staff for services performed?	Yes		
If yes, how many direct care workers are supervised by 1 supervisor	1 es		
If yes, average number of hours of on-site supervision provided per staff during a typical week	1		
Service Delivery, Groups			
Does your organization deliver this service to groups?	Yes		
If yes, what is the typical group size?	2		
Staffing Ratios. Input the percentage of face-to-face direct service time provided at each of the following ratio	os:		
2:1 staff-to-individual ratio	10.00%		
1:1 staff-to-individual ratio	70.00%		
1:2 staff-to-individual ratio	20.00%		
1:3 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Telehealth/Remote Services			
Does your organization deliver this service via telehealth?	Yes		
If yes, what percentage of day habilitation / community participation services were delivered via telehealth?	70%		



Review of Day Habilitation (continued)

Information Requested	Example	Day Habilitation / Community Participation	PDMS
Telehealth/Remote Staffing Ratios. Input the percentage of remote direct service time provide	ded at each of the following ratios	:	
1:1 staff-to-individual ratio	10.00%		
1:2 staff-to-individual ratio	70.00%		
1:3 staff-to-individual ratio	20.00%		
1:4 staff-to-individual ratio	0.00%		
1:5 staff-to-individual ratio	0.00%		
1:10 staff-to-individual ratio	0.00%		
1:20 staff-to-individual ratio	0.00%		
1:30 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Information Dominated	5	Community	DDMO
Information Requested Caseload and Service Design	Example	Support	PDMS
Number of individuals receiving services from your organization	70		
Number of individuals living independently	45		
Number of individuals living littleperidently Number of individuals living with own family	25		
Number of individuals living with own family Number of individuals receiving medication management during provision of service	0.0		
Average number of individuals (or groups) seen per week per direct service staff worker	2		
Average service length in hours	2		
Length of Non-Daily Services (consider services of less than 24 hours, total should equal 100%)			
Percentage that are fewer than 4 hours	60.00%		
Percentage that are 4 or more hours, but less than 6 hours	30.00%		
Percentage that are more than 6 hours	10.00%		
Supervision of Direct Care Staff		·	
Does your organization provide on-site supervision of staff for services performed?	No		
If yes, how many direct care workers are supervised by 1 supervisor	4		
If yes, average number of hours of on-site supervision provided per staff during a typical week	1		
Service Delivery, Groups (non-telehealth)		;	
Does your organization deliver this service to groups?	No		
If yes, what is the typical group size?	2		



Review of CSS (continued)

Information Requested	Example	Community Support	PDMS
Staffing Ratios. Input the percentage of face-to-face direct service time provided at each of the t		Сирроп	1 Dillo
2:1 staff-to-individual ratio	10.00%		
1:1 staff-to-individual ratio	70.00%		
1:2 staff-to-individual ratio	20.00%		
1:3 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Telehealth/Remote Services			
Does your organization deliver this service via telehealth?	No		
If yes, what percentage of community support services were delivered via telehealth?	0.00%		
Telehealth/Remote Staffing Ratios. Input the percentage of remote direct service time provided a	at each of the followin	g ratios:	
1:1 staff-to-individual ratio	10.00%		
1:2 staff-to-individual ratio	70.00%		
1:3 staff-to-individual ratio	20.00%		
1:4 staff-to-individual ratio	0.00%		
1:5 staff-to-individual ratio	0.00%		
1:10 staff-to-individual ratio	0.00%		
1:20 staff-to-individual ratio	0.00%		
1:30 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Review of Supported Employment

Information Requested	Example	Supported Employment	PDMS
Caseload and Service Design			
Number of individuals receiving services from your organization	70		
Average number of individuals (or groups) seen per week per job coach	10		
Average service length in hours	2.0		
Number of individuals receiving medication management during provision of service	2.0		
Supervision of Job Coaches			
Does your organization provide face-to-face supervision of job coaches for services performed?	Yes		
If yes, how many job coaches are supervised by 1 supervisor	4		
If yes, average number of hours of face-to-face supervision provided per job coach during a typical week	1		
Service Delivery, Groups (non-telehealth)			
Does your organization deliver this service to groups?	Yes		
If yes, what is the typical group size?	2		
Staffing Ratios. Input the percentage of face-to-face direct service time provided at each of the following	g ratios:		
1:1 staff-to-individual ratio	70.00%		
1:2 staff-to-individual ratio	20.00%		
1:3 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		



Review of Supported Employment

Information Requested	Example	Supported Employment	PDMS
Telehealth/Remote Services			
Does your organization deliver this service via telehealth?	No		
If yes, what percentage of supported employment services were delivered via telehealth?	0.00%		
Telehealth/Remote Staffing Ratios. Input the percentage of remote direct service time provided a	t each of the follo	ving ratios:	
1:1 staff-to-individual ratio	10.00%		
1:2 staff-to-individual ratio	70.00%		
1:3 staff-to-individual ratio	20.00%		
1:4 staff-to-individual ratio	0.00%		
1:5 staff-to-individual ratio	0.00%		
1:10 staff-to-individual ratio	0.00%		
1:20 staff-to-individual ratio	0.00%		
1:30 staff-to-individual ratio	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%		
Other staff-to-individual ratio (type ratio here)	0.00%	•	



Residential Habilitation - Staffed Residential Services

Information Requested	Evenne	One Person Home	Two to Three	Four to Five Person Home	Six or More
Service Design	Example	nonie	reison nome	reison nome	reison nome
Number of individuals receiving service from your organization	50				
Number of individuals receiving medication management during provision of service	40				
Number of homes where services are provided	20				
Average absence days per member per year (vacation, hospitalization, etc.)	5.00				
Percentage of individuals regularly participating in non-residential habilitation activities (paid or unpaid)					
(e.g., Day Program, Supported Employment, School)	70%				
For members participating in non-residential habilitation activities, average number of days per					
week they participate	5.00				
For members participating in non-residential activities, average number of hours per day they					
participate	6.00				
Staffing Ratios. Input the average percentage of direct service time provided at each of the follows	ing ratios:				
1:1 staff-to-individual ratio	50.00%	40.00%	40.00%	40.00%	40.00%
1:2 staff-to-individual ratio	20.00%				
1:3 staff-to-individual ratio	30.00%				
1:4 staff-to-individual ratio	0.00%				
1:5 staff-to-individual ratio	0.00%				
1:6 staff-to-individual ratio	0.00%				
2:1 staff-to-individual ratio	0.00%				
2:2 staff-to-individual ratio	0.00%				
2:3 staff-to-individual ratio	0.00%				
2:4 staff-to-individual ratio	0.00%				
2:5 staff-to-individual ratio	0.00%				
2:6 staff-to-individual ratio	0.00%				
Other staff-to-individual ratio (type ratio here)	0.00%				
Other staff-to-individual ratio (type ratio here)	0.00%				
Other staff-to-individual ratio (type ratio here)	0.00%				



Residential Habilitation - Staffed Residential Services (continued)

Information Requested	Example	One Person Home	Two to Three Person Home	Four to Five Person Home	Six or More Person Home
Staffing Ratio Information	•		•		
Please enter the number of staff and participants for an average week during the cost reporting period	that does not in	lude holidays. U	Ising whole numb	ers, enter the nu	mber of staff
and the number of participants by service.					
Residential Services - 24 Hour Service to more than one participant					
Average weekday # of staff per shift in a normal week					
Day (7am - 3pm)	1.00				
Swing Shift (7am - 9am)	2.00				
Evening (3pm - 11pm)	1.00				
Swing Shift (5pm - 7pm)	1.00				
Night (11pm - 7am)	1.00				
Weighted Average Weekday Staffing					
Average weekend # of staff per shift in a normal week					
Day (7am - 3pm)	1.00				
Swing Shift (7am - 9am)	2.00				
Evening (3pm - 11pm)	1.00				
Swing Shift (5pm - 7pm)	1.00				
Night (11pm - 7am)	1.00				
Weighted Average Weekend Staffing					
Weighted Average Weekly Staffing					
Average # of Participants During the Cost Report Period	3.00				
Average Participants per 1 Staff Member	-	-	-	-	-
Overnight Services					
Are staff working overnight shifts permitted to sleep?	Yes				
If yes, are overnight hours treated as 'regular' work hours subject to minimum wage and overtime					
requirements?	Yes				



Residential Habilitation - Staffed Residential Services (continued)

ā		
1	8	

		One Person	Two to Three	Four to Five	Six or More
Information Requested		Home	Person Home	Person Home	Person Home
Square Footage					
Does your organization have square footage in residence dedicated to direct staff?	Yes				
If yes, sum of square footage for dedicated direct staff sleeping areas.					
If yes, sum of square footage for dedicated direct staff office space separate from sleeping area.					
If yes, sum of square footage for locked medication areas.					
If yes, enter total square footage of entire buildings.	1600				
On-Site Supervision of Direct Care Staff					
Does your organization provide on-site supervision of staff for services performed?	Yes				
If yes, how many direct care workers are supervised by 1 supervisor					
If yes, average number of hours of on-site supervision provided per staff during a typical week					



Next Steps in the Cost Report Process



Next Steps

- Myers and Stauffer is noting the feedback and suggested revisions provided today.
- It is anticipated a revised cost report will be provided to you the week of 5/23.
- The revised cost report will include all feedback from the Work Group meetings held the week of 5/16.
- Feedback is encouraged between Work Groups; please do not hesitate
 to reach out to NHCostReport@mslc.com with feedback between
 meetings. This will help us refine the cost report as quickly as possible.
- Myers and Stauffer is working with the Department to schedule additional Rate Work Group meetings over the coming weeks.



Questions?







